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| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 09/942,458             |              |
|   | Filing Date          | August 29, 2001        |              |
|   | First Named Inventor | Larry A. LAREW         |              |
|   | Art Unit             | 1654                   |              |
|   | Examiner Name        | R. R. Teller           |              |
| Total Number of Pages in This Submission  | 18 + 16 references   | Attorney Docket Number | 342312003801 |

**ENCLOSURES (Check all that apply)**

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form + duplicate for fee processing - 2 pages<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply - 10 pages<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement (Supplemental) - 3 pages<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Form PTO/SB/08a/b + copy - 2 pages<br>16 References<br>Return Receipt Postcard |
| <b>Remarks</b>  |   |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |  |          |        |
|--------------|--|----------|--------|
| Firm Name    | MORRISON & FOERSTER LLP (Customer No. 25226) |          |        |
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| Printed name | Kimberly A. Bolin                            |          |        |
| Date         | June 30, 2005                                | Reg. No. | 44,546 |

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Dated: June 30, 2005

Signature: (Georgina Matos)